

Name
in
Full

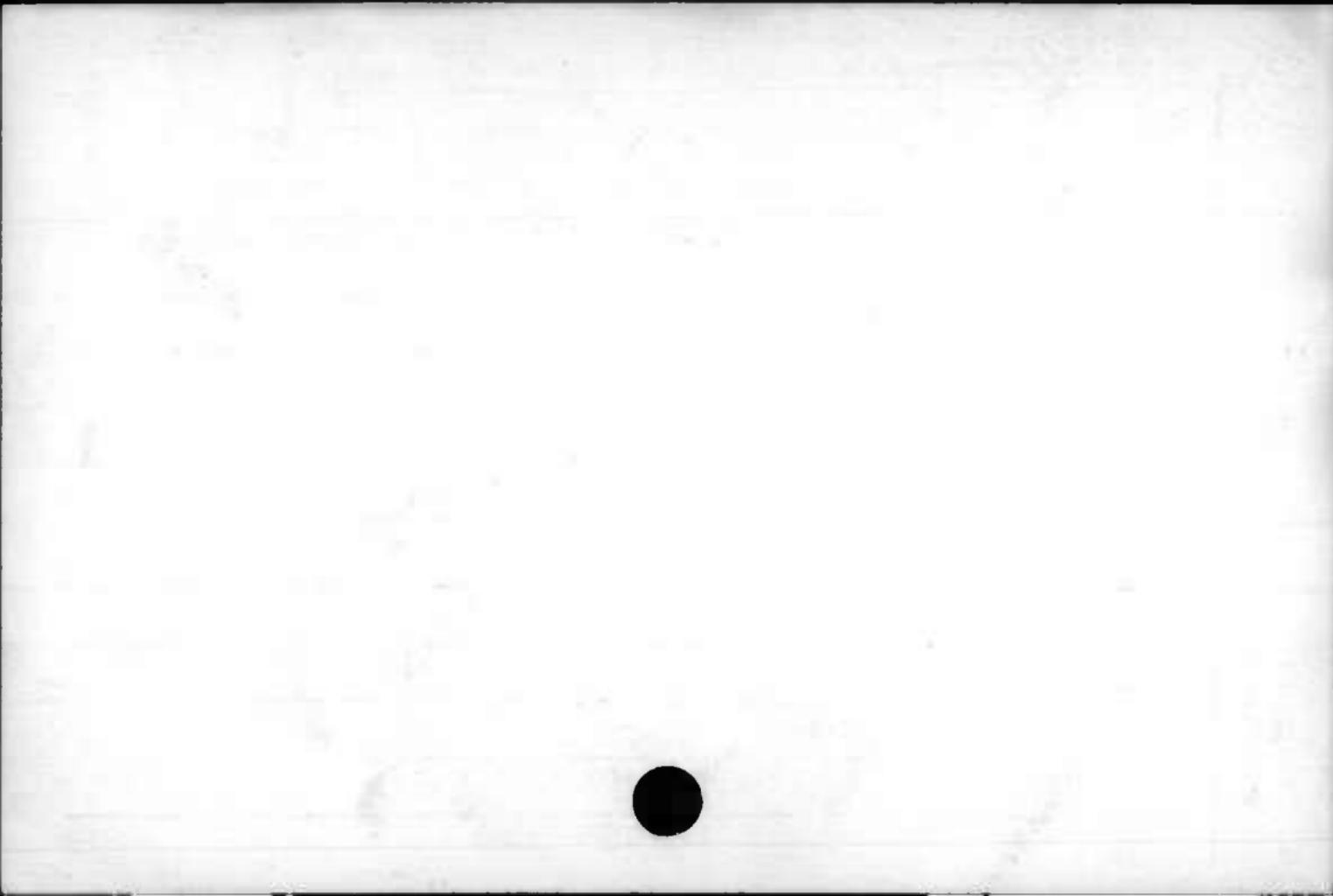
To BE ANSWERED BY
NEAREST FRIEND

CERTIFICATE OF DEATH

Died at	Town	County	MARYLAND		
Date of death 190	Month	Day	Years	Months	Days
Sex	Color or Race	Age	Birth- place		
Married, Single or Widowed	Occupation				
Name of Wife or Husband					
Father's Name	Francis Brady			Father's Birthplace	Baltimore
Mother's Maiden Name	Elizabeth Gross S.			Mother's Birthplace	Md
Name of person giving Information	Mark Brady S.			How related to deceased	Baltimore

CAUSES OF DEATH

PHYSICIAN OR CORONER	Primary	Pneumonia, Bright's Disease	How long
	Immediate		How long
	Are the name, age, sex, color, date and place correctly given above?	W	Signature of Physician
Accident or Suicide?		Address	Mark Brady, Md



Name
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TO BE ANSWERED BY
NEAREST FRIEND

PHYSICIAN
OR CORONER

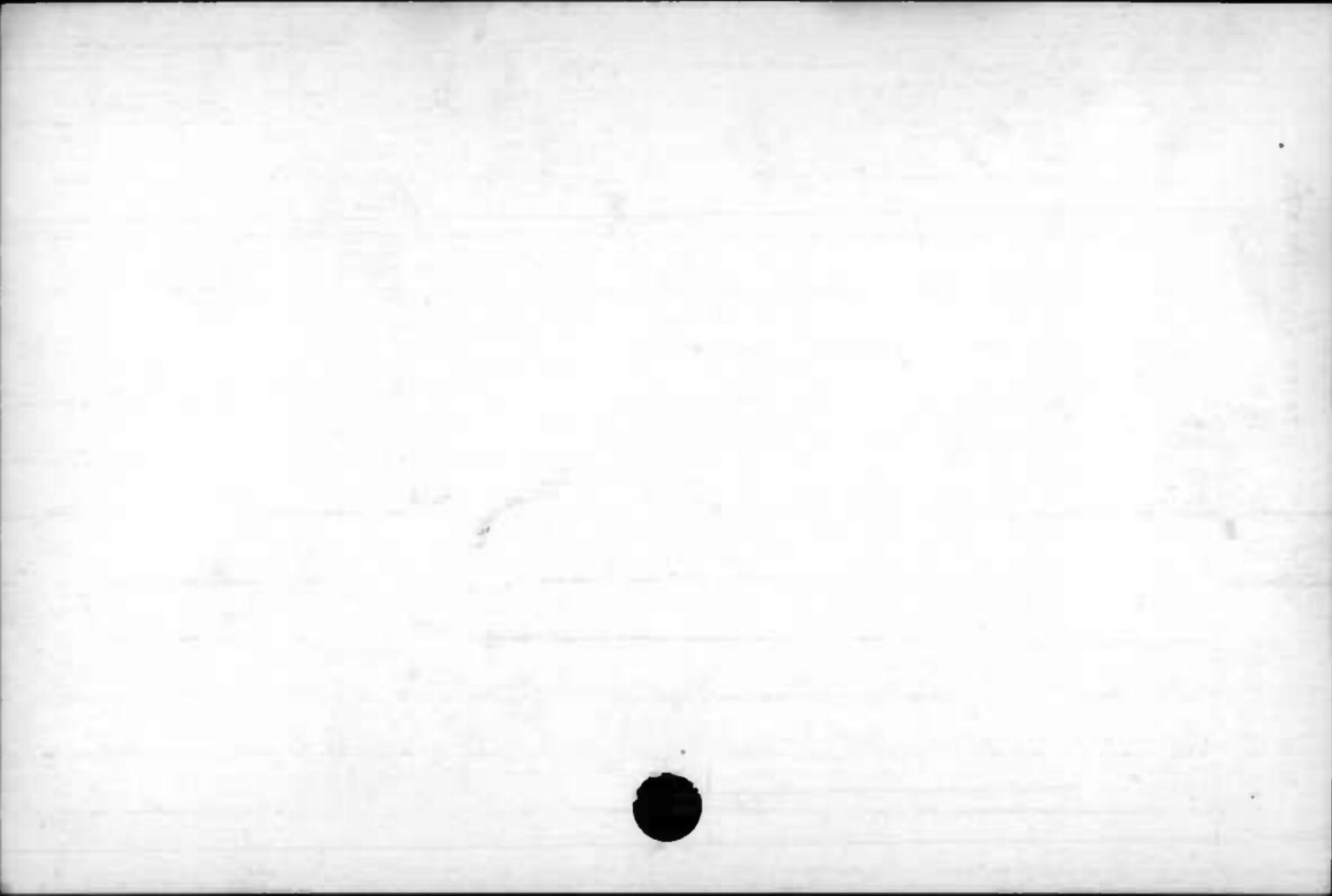
Charles Allen Brogden

CERTIFICATE OF DEATH

Died at	Town	County		MARYLAND	
Date of death	Month	Day	Years	Months	Days
Sex	Color or Race	Age		Birth-place	
Occupation	Where Residing if not at place of death			Elk Ridge Md	
Married, Single or Widowed	Name of Wife or Husband				
Father's Name	no father			Father's Birthplace	
Mother's Maiden Name	Mortilda Brogden			Mother's Birthplace Maryland	
Name of person giving information	Mary Thomas			How related to deceased Grandmother	

CAUSES OF DEATH

Primary	Broncho Pneumonia		How long	every day
Immediate	some (92)		How long	" "
Are the name, age, sex, color, date and place correctly given above?	yes	Signature of Physician	Arthur Williams	
Address	Elk Ridge Md			
Accident or Suicide?	no			



Name
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CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIENDPHYSICIAN
OR CORONER

Mary Clark

Town

County

MARYLAND

Died at

Eskridge

Howard

Date

Dec

Month

Day

Years

Months

Days

of death

1905

Dec

1st

Age

30

Sex

Female

Color or
Race

African

Birth-
place

A. & Co Inc

Occupation

Where Residing if not
at place of death

Hanover Md

Married, Single
or Widowed

Widow

Name of Wife or
Husband

Tomil Clark

Father's
Name

Josias Jones

Father's
Birthplace

Mt. Kisco

Mother's
Maiden Name

Mt. Brown

Mother's
BirthplaceName of person giving
Information

Aly Clark

How related
to deceased

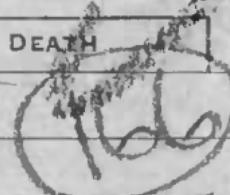
Son

CAUSES OF DEATH

Primary

Accidental

How long



How long

Immediate

Are the name, age, sex, color, date
and place correctly given above?

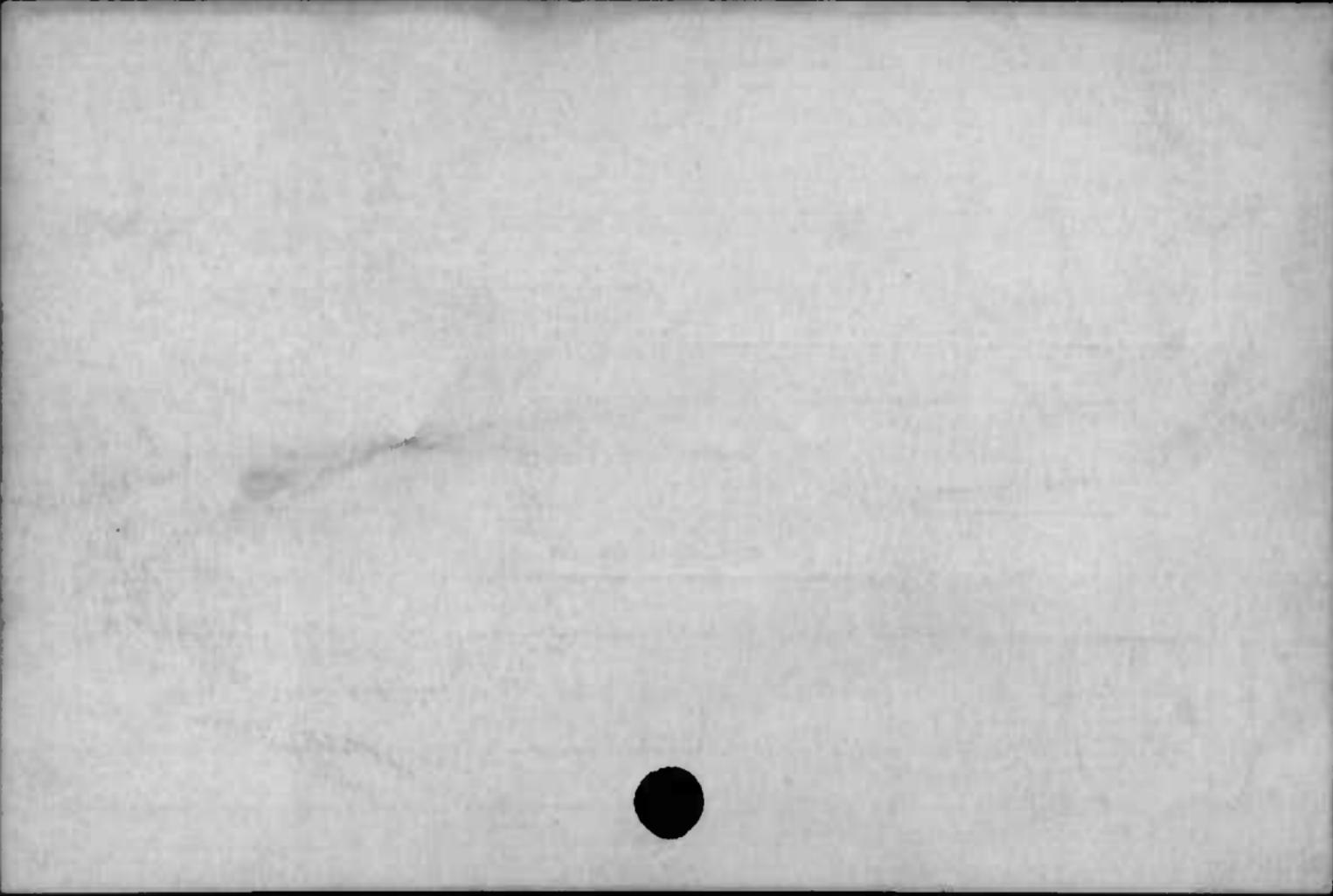
Ys

Signature of
PhysicianHenry Bell
coroner

Address

Accident or Suicide?

Accidental



Name
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Phoebe M. Clark

CERTIFICATE OF DEATH

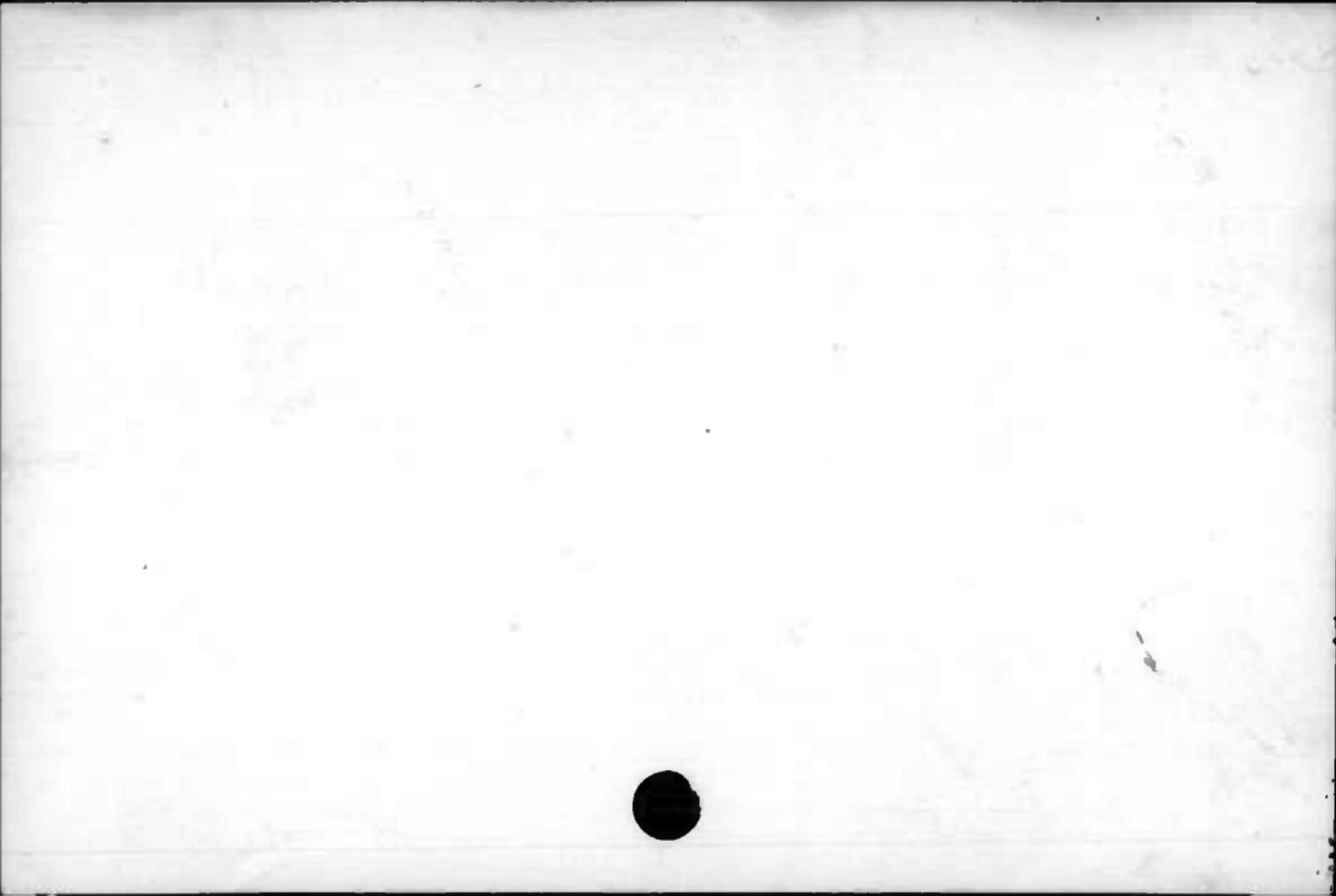
To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Date of death 1905	Month 12	Day 15	Years 25	Months	Days
Sex Female	Color or Race Black	Birth-place Md.			
Occupation Housewife	Where Residing If not at place of death at her home				
Married, Single or Widowed married	Name of Wife or Husband Geo. F. Clark	Father's Birthplace Md.			
Father's Name Henry William	Mother's Maiden Name Rachel Brattas	Mother's Birthplace Md.			
Name of person giving Information Dorothy Pomeroy	How related to deceased friend				

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Valvular Heart Disease	No	How long Several years
Immediate	Dropsey + Heart Failure	prognosis	How long
Are the name, age, sex, color, date and place correctly given above?		Signature of Physician T.W. Lillard M.D.	
		Address Savage	
Accident or Suicide?		Md.	



Name
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Marion Brumbell

CERTIFICATE OF DEATH

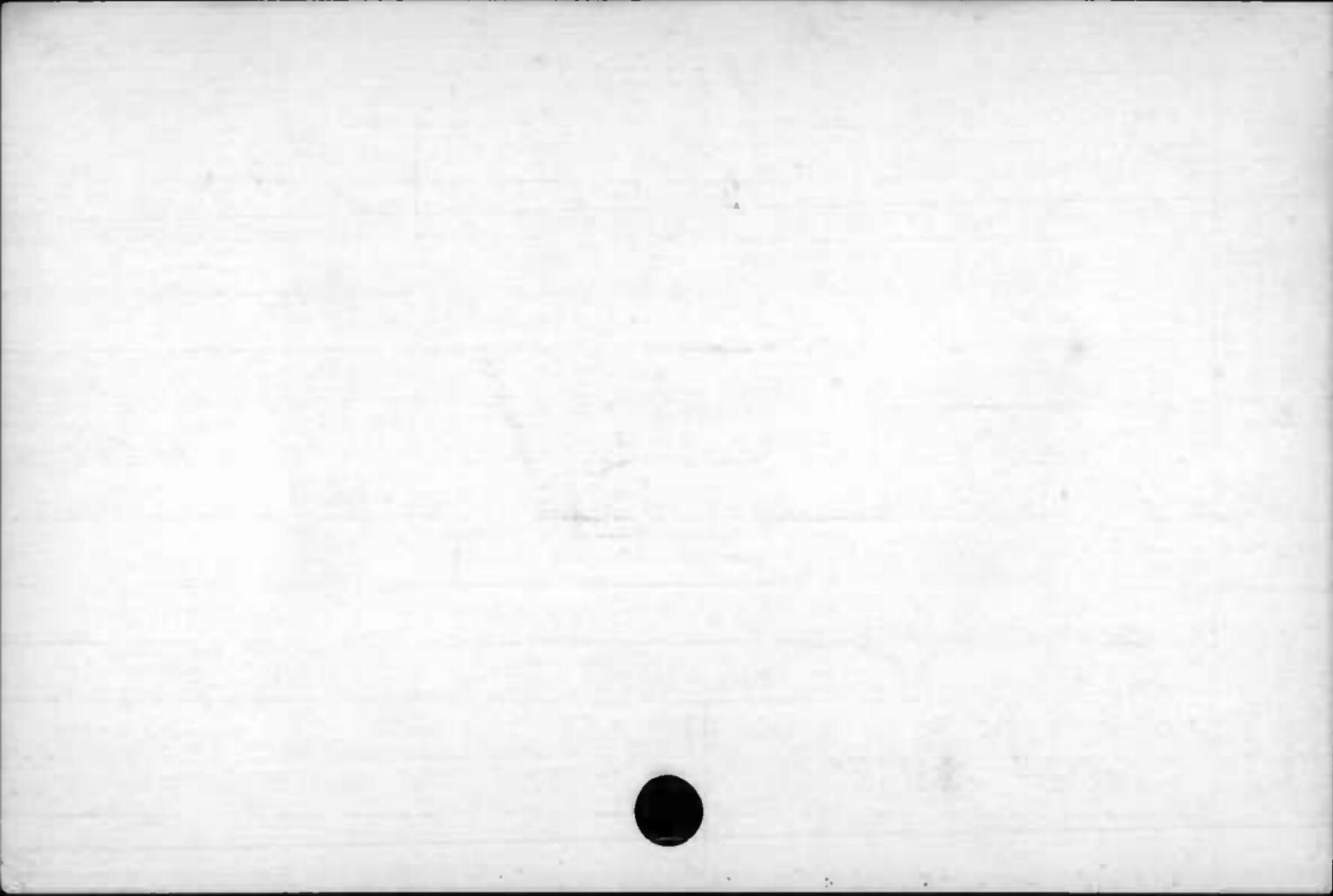
TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town		County	MARYLAND		
Date of death 1905	Month	Day	Howard	Months	Days	
Sex	Color or Race	Age	Occupation	Birth- place	Death- place	
Female	Colored	26	Housekeeper	Maryland	Maryland	
Married, Single or Widowed	Married					
Name of Wife or Husband	Marshall Brumbel					
Father's Name	John Collings			Father's Birthplace	Ind	
Mother's Maiden Name	Ellen Collings		(20)	Mother's Birthplace	Ind	
Name of person giving Information	Marshall Brumbel			How related to deceased	Husband	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Chronic Interstitial Nephritis.		How long
Immediate	Asthma		—
Are the name, age, sex, color, date and place correctly given above?	yes	Signature of Physician	S.G. Drury M.D.
		Address	Ellicott City, Md.
Accident or Suicide?			



Name
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Minnie Dundee

CERTIFICATE OF DEATH

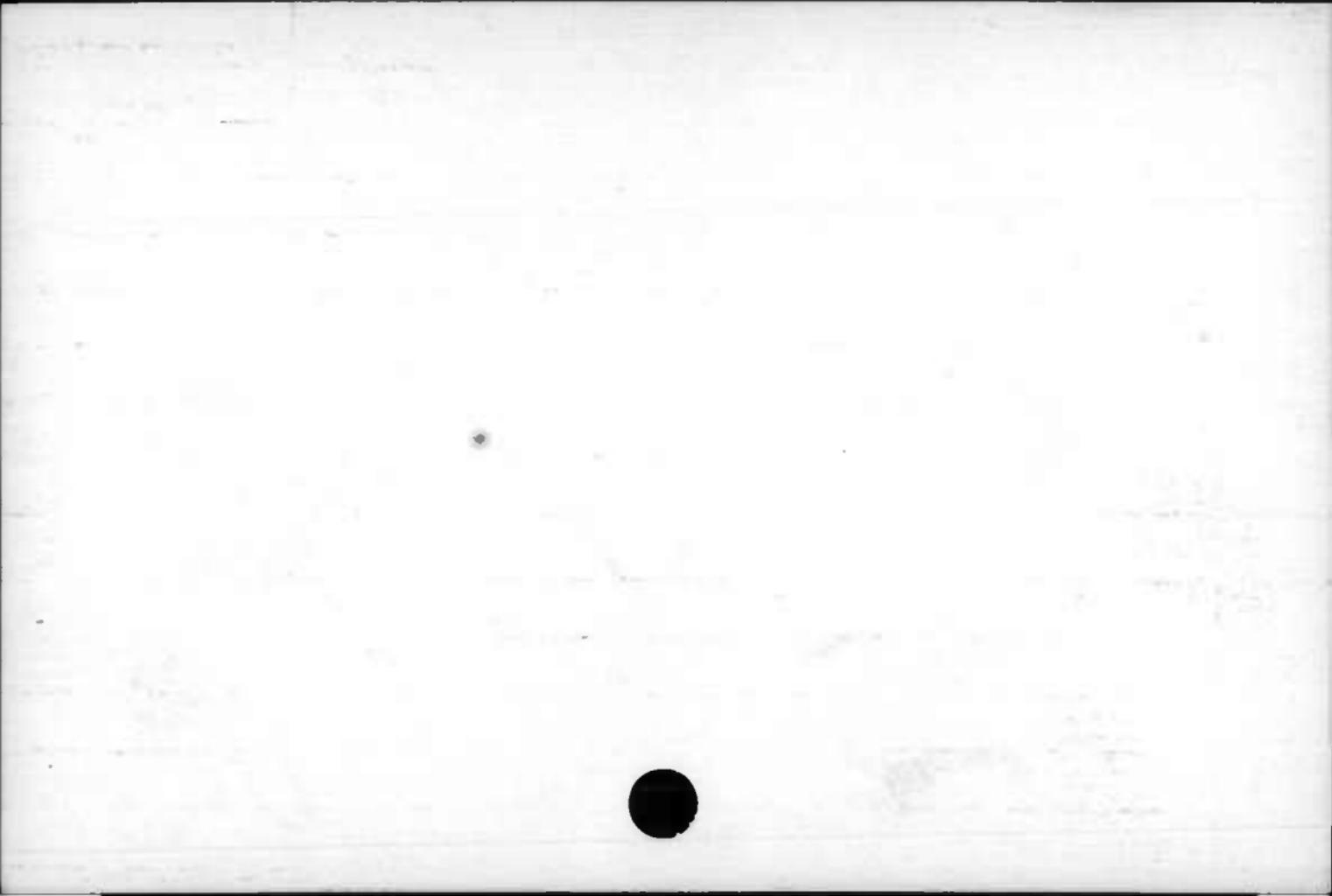
To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Date of death	Month	Day	Years	Months	Days
Sex	Color or Race	Age			
Occupation	Where Residing if not at place of death				
Married, Single or Widowed	Name of Wife or Husband				
Father's Name	August Dundee		Father's Birthplace	Germany	
Mother's Maiden Name	Julia A. Frey		Mother's Birthplace	Germany	
Name of person giving information	Chas. A. Frey		How related to deceased	Brother-in-law	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Lobar Pneumonia	How long	8 days
Immediate	Asthma	How long	
Are the name, age, sex, color, date and place correctly given above?		Signature of Physician	S. J. Durings, M.D.
		Address	Ellicott City, Md.
Accident or Suicide?			



Name
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Auguste Stanislas Fonteneau

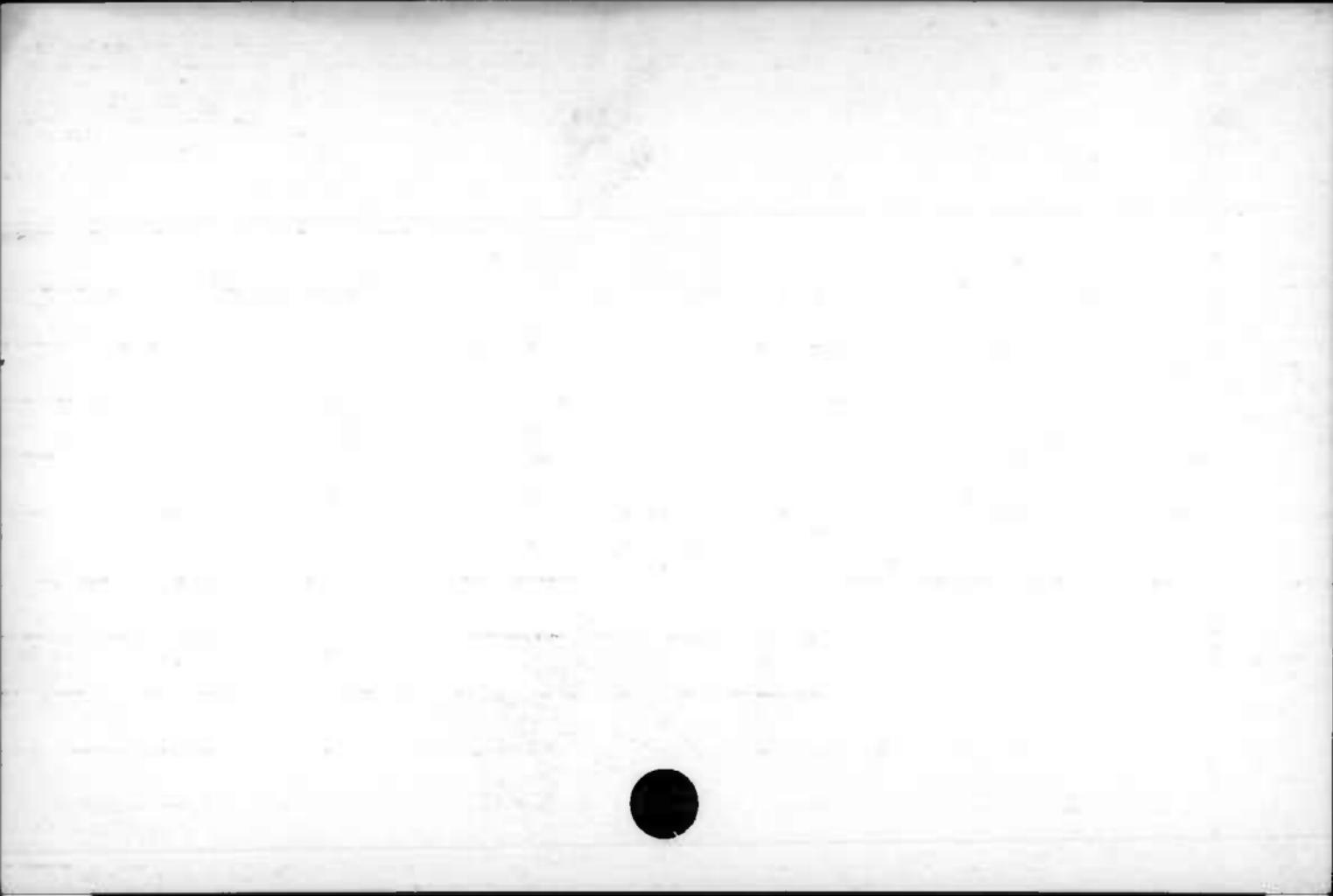
CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND
St Charles.		Howard	
Date of death	Month	Day	Years
1905	Dec	19	Age 64
Sex	Color or Race	Birth-place	
Male	White	France	
Occupation	Where Residing if not at place of death		
Priest	—		
Married, Single or Widowed	Name of Wife or Husband	—	
Single	—	—	
Father's Name	Father's Birthplace		
—	—		
Mother's Maiden Name	Mother's Birthplace		
—	—		
Name of person giving information	How related to deceased		
—	—		

CAUSES OF DEATH

PHYSICIAN OR CORONER	Primary	Heart-disease (99)	How long	Some years
	Immediate	Heart failure	How long	15 minutes
Are the name, age, sex, color, date and place correctly given above?		Signature of Physician	B. J. Byrne	
Yes.		Address	Elliott City Md	
Accident or Suicide?				



Name
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To BE ANSWERED BY
NEAREST FRIEND

PHYSICIAN
OR CORONER

Ann Elizabeth Hemler

CERTIFICATE OF DEATH

Died <u>Near Eek Ridge</u>		Town		County		MARYLAND					
Date of death	1905	Month	Dec	Day	29 th	Years	85	Months	2	Days	20
Sex	Female	Color or Race	White		Birth-place	Maryland					
Occupation						Where Residing if not at place of death					
Married, Single or Widowed	Widow	Name of Husband	William Hemler					Father's Birthplace	Maryland		
Father's Name	Henry Spalding					Mother's Birthplace	Maryland				
Mother's Maiden Name	Maria Hughes					How related to deceased	Son				
Name of person giving information	John W. Hemler										

CAUSES OF DEATH

Primary

Age

How long

—



Immediate

Cardiac Failure

How long

2 wks.

Are the name, age, sex, color, date and place correctly given above?

yes

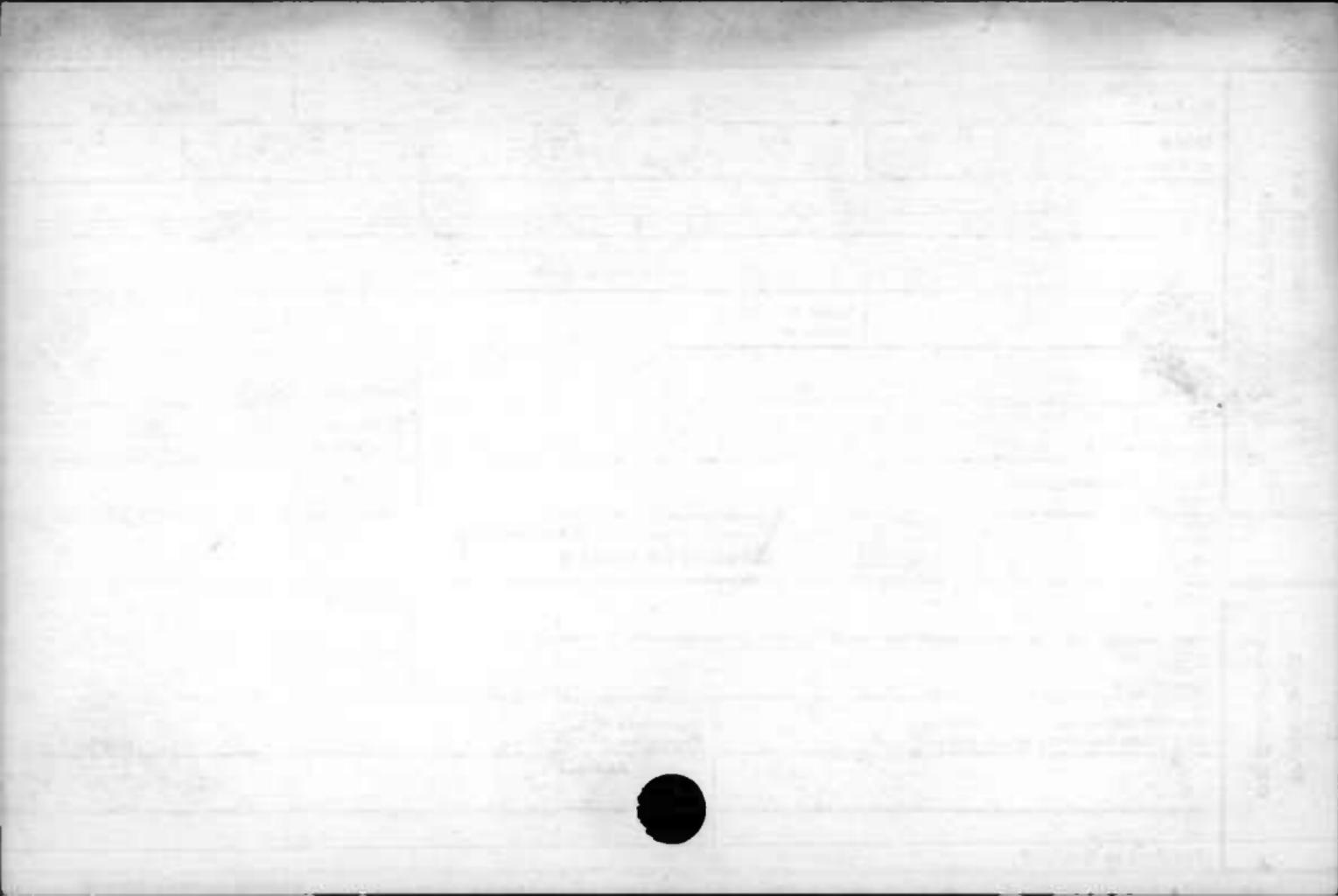
Signature of Physician

W.M.R. Eareckson

Address

Eek Ridge, Md.

*Accident or Suicide?

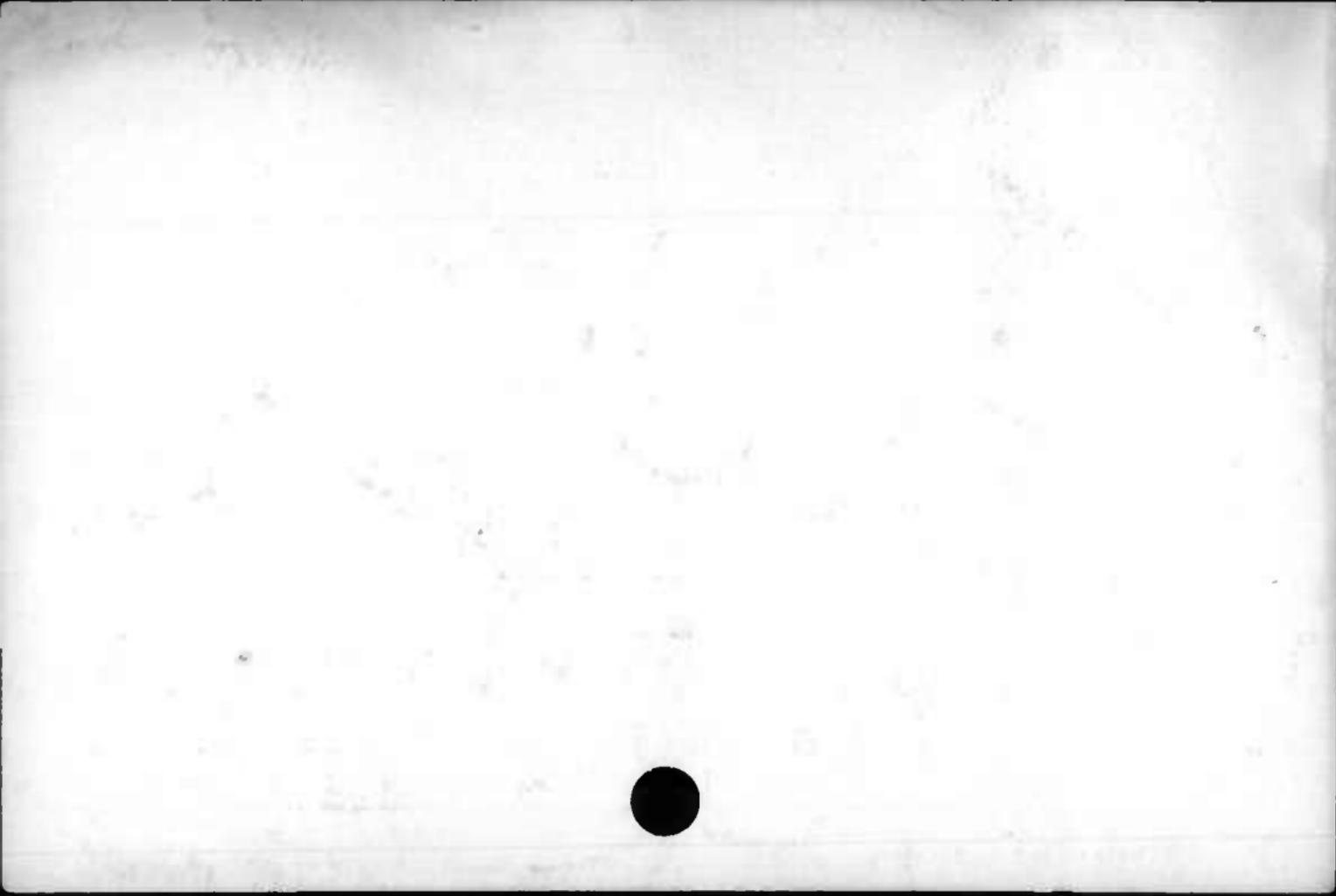


Name
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TO BE ANSWERED BY
NEAREST FRIEND

PHYSICIAN
OR CORONER

CERTIFICATE OF DEATH				
MARYLAND				
Died at	Dayton	own	County	Howard
Date of death 1905	Dec	Mont	Years	20
Age	20	Month	Months	3
Sex	Male	Color or Race	Birth-place	Ind
Married, Single or Widowed	Black Occupation			
Name of Wife or Husband				
Father's Name	George Johnson	Father's Birthplace		Ind
Mother's Maiden Name	Sara Wilson	Mother's Birthplace		Ind
Name of person giving Information	Sara Johnson	How related to deceased		Mother
CAUSES OF DEATH				
Primary	151			How long
Immediate	Resuscitation	Birth	How long	
Are the name, age, sex, color, date and place correctly given above?		Signature of Physician	S. A. Stichol	
		Address	Dayton Ind	
Accident or Suicide?				



Name
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George Samuel Milton

CERTIFICATE OF DEATH

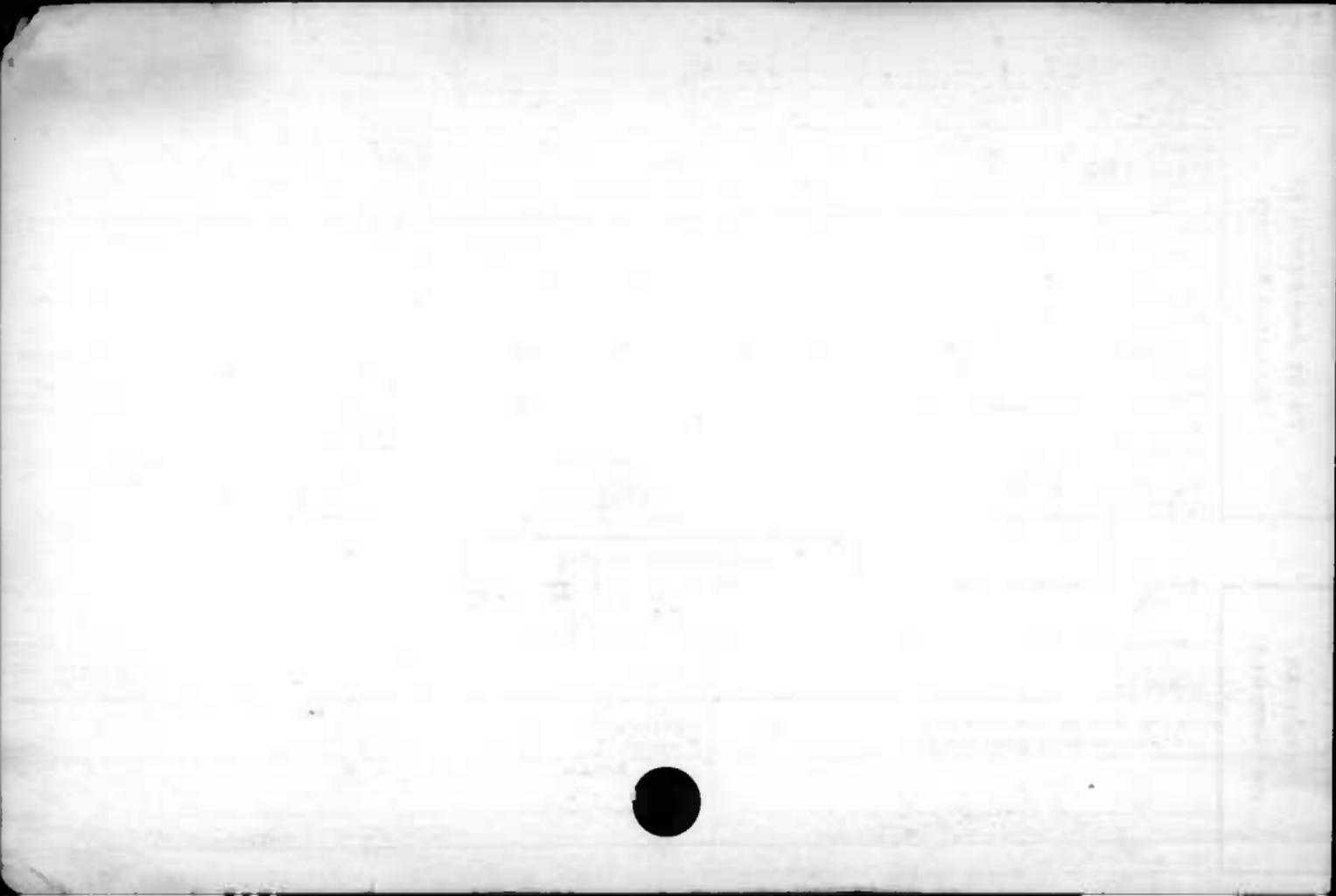
TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Date of death	Month	Day	Years	Months	Days
Sex	Color or Race	Birth-place			
Occupation	Where Residing if not at place of death				
Married, Single or Widowed	Name of Wife or Husband	Henrietta Jones			
Father's Name	Lewis Milton				
Mother's Maiden Name	Sophie Taylor				
Name of person giving information	Isiah M. Fisher				

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Tuberculosis		How long
Immediate	Hemorrhage from lungs & bronchi		12 hrs
Are the name, age, sex, color, date and place correctly given above?	Yes	Signature of Physician	How long
		J. W. Fisher Jr.	19 hours
		Address	West Friendship
			Howard Co., Md.—
Accident or Suicide?			



Name
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Full

Louis Montgillion

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at.	Town	County		MARYLAND		
Eek Ridge	Howard					
Date of death	Month	Day	Years	Months	Days	
1905	Dec.	10	84	8	22	
Sex	Male	Color or Race	White	Birth-place	Eek Ridge, Md.	
Occupation	Shoemaker			Where Residing if not at place of death		
Married, Single or Widowed	Name of Wife or Husband			Mary Ann Duvall		
Father's Name	Jeremiah Montgillion			Father's Birthplace	France	
Mother's Maiden Name	Sarah Davis			Mother's Birthplace	Maryland.	
Name of person giving information	Mrs. Ann E. Hook			How related to deceased	Daughter.	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

old age

154

How long

Immediate

Debility

How long

about 1 year

Are the name, age, sex, color, date and place correctly given above?

Yes

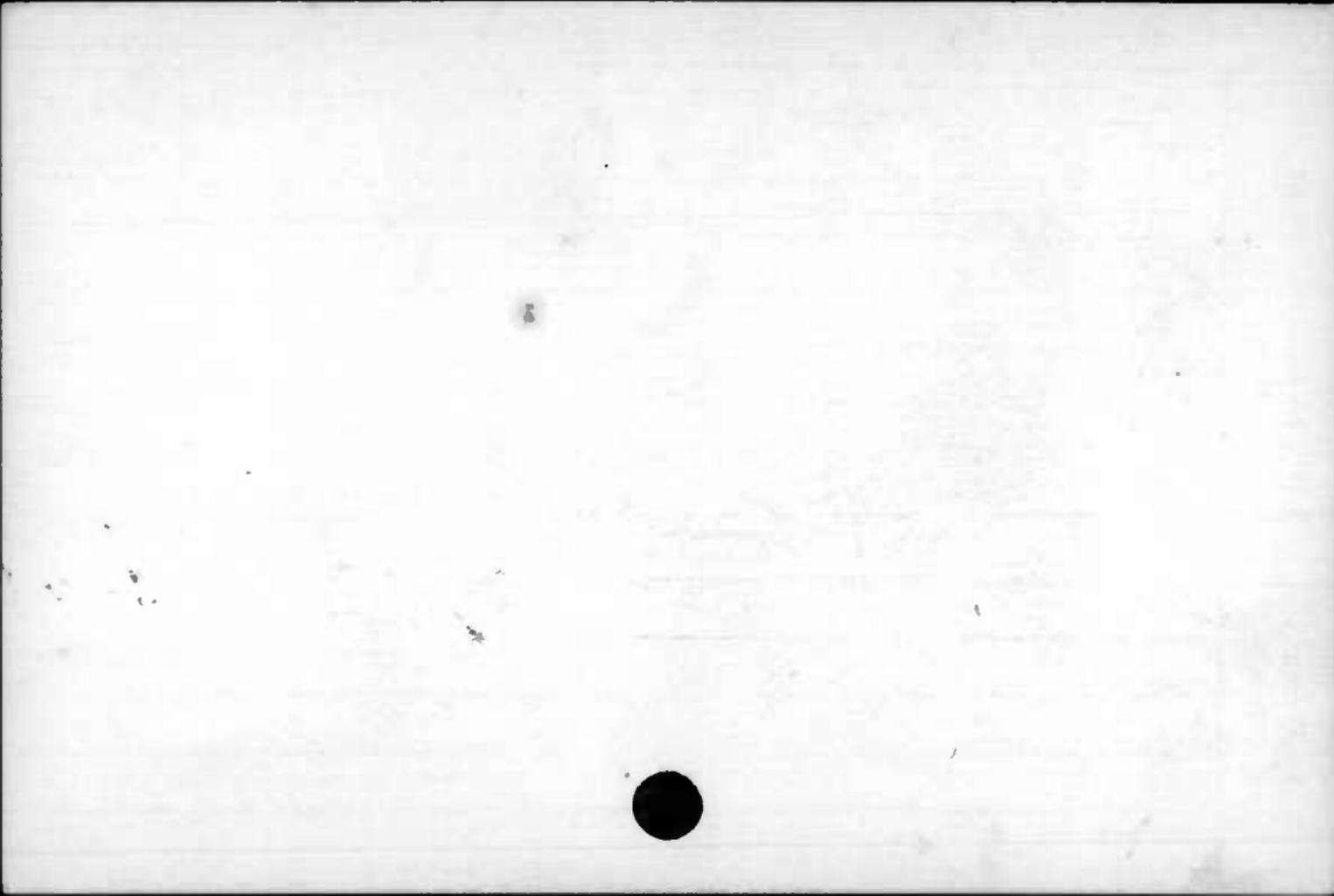
Signature of Physician

Mr. Eareckson

Address

Eek Ridge, Md.

Attala or Sub



Name
in
Full

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CERTIFICATE OF DEATH

TO BE ANSWERED BY

NEAREST FRIEND

Died at		Town	County			
Died at	Dorsy Run		Gleoward		MARYLAND	
Date of death	1905	Month	Day	Years	Months	Days
	Debr.		8*	Age about 45	-	-
Sex	male	Color or Race	white	Birth-place	Austria	
Married, Single or Widowed	married	Occupation	laborer on Rail Road			
Name of Wife or Husband						
Father's Name						
Mother's Maiden Name						
Name of person giving information	Mr. Shumaker					

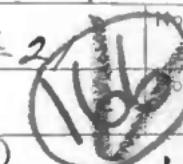
CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Killed by B&O R.R. train # 2

How long



Nov long

Immediate

accident

Nov long

Are the name, age, sex, color, date and place correctly given above?

yes

Signature of Physician

Bernard H. Hallenhorst, J.P.

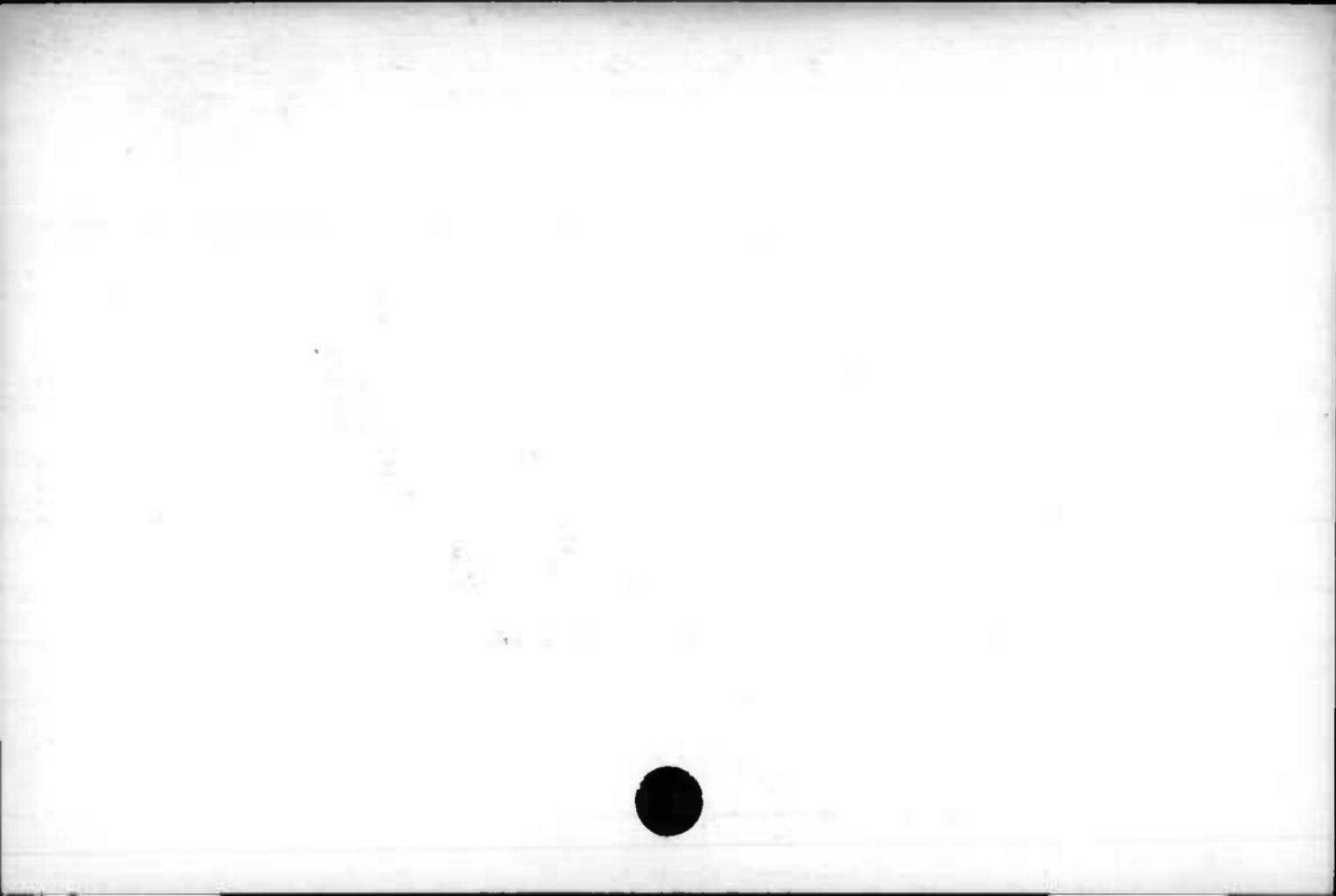
Address

acting Coroner
Elliott City

Md.

Accident or Suicide?

Accident



Name
in
Full

TO BE ANSWERED BY
NEAREST FRIEND

CERTIFICATE OF DEATH

Died at	Town	County	MARYLAND			
Date of death 190	Month	Day	Age	Years	Months Days	
Sex	Color or Race	white	Birth-place	Md		
Married, Single or Widowed	Occupation		Housewife			
Name of Wife or Husband			Edgar M. Smallwood			
Father's Name			Father's Birthplace	Md		
Mother's Maiden Name			Mother's Birthplace	Md		
Name of person giving information			How related to deceased	husband		

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Septicemia

(20)

How long

5 days

Immediate

Heart Failure

How long

Indefinite

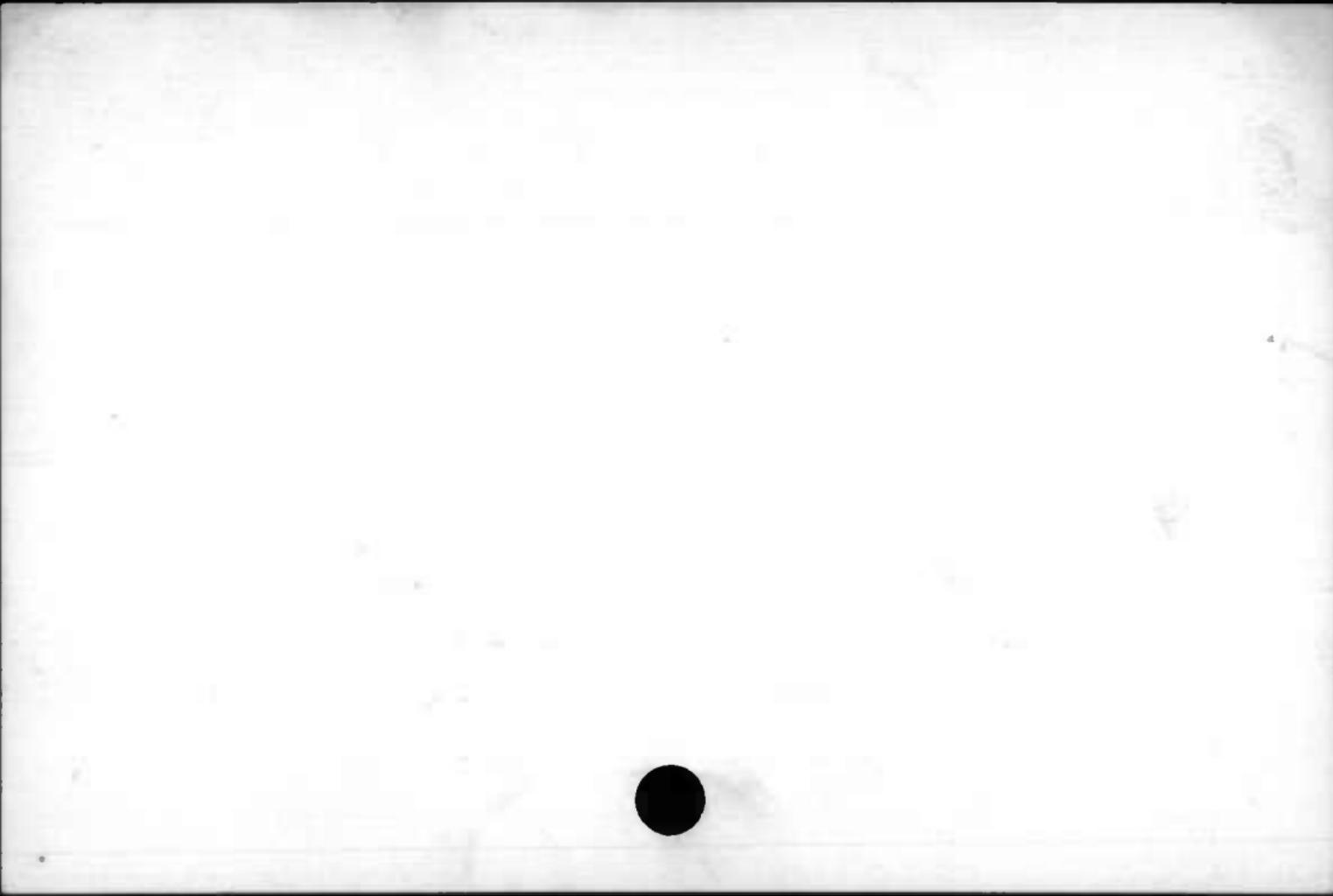
Are the name, age, sex, color, date and place correctly given above?

Signature of Physician

Address

Accident or Suicide?

Homicide



Name
in
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Betsey Thomas

CERTIFICATE OF DEATH

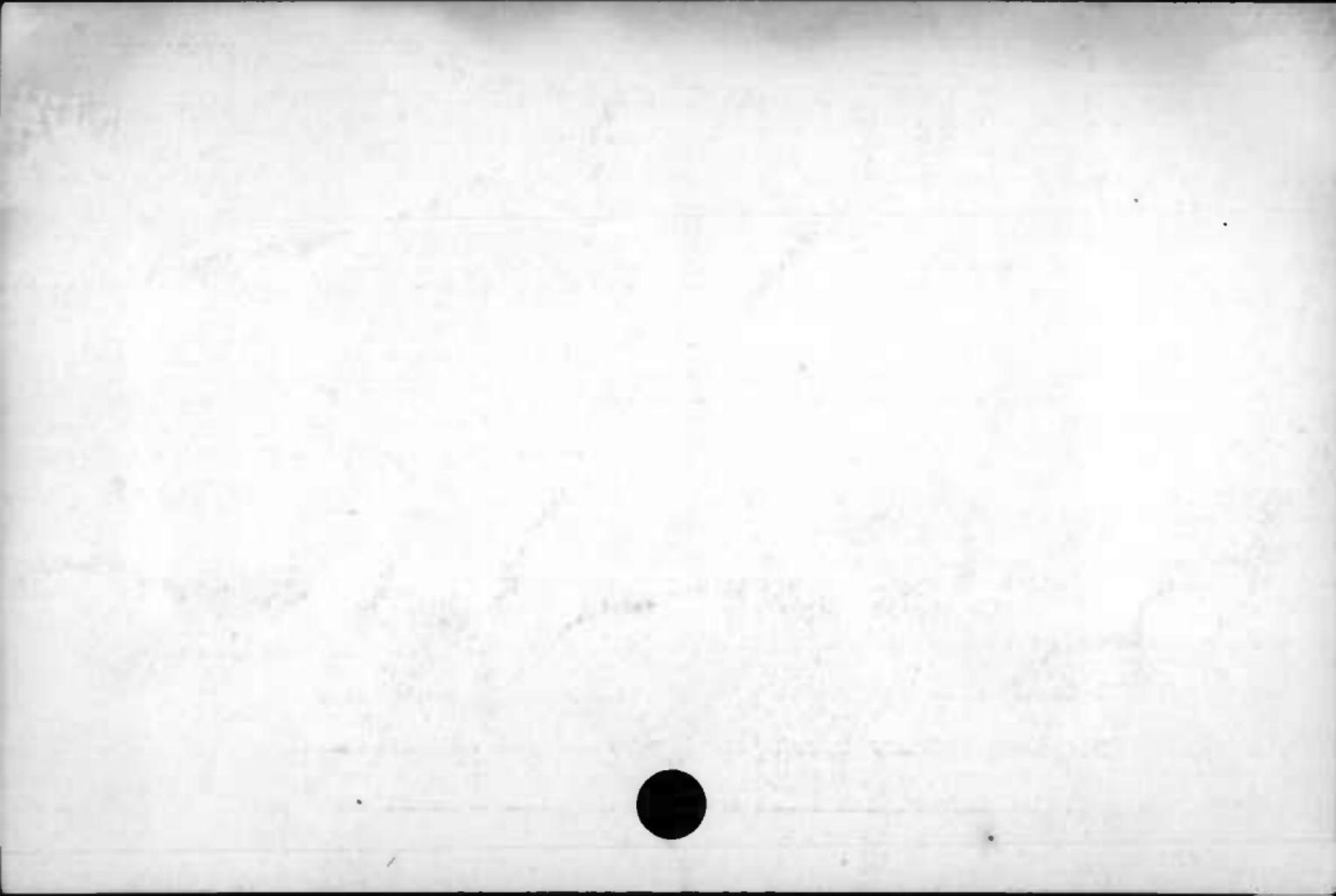
TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town		County	MARYLAND	
Date of death 1905	Month Dec.	Day 29.	Years 78	Months -	Days -
Sex Female	Color or Race	Colored.		Birth-place	Maryland.
Married, Single or Widowed	Widow	Occupation		none	
Name of wife or Husband	Loyd Thomas.				
Father's Name	William Garrett			Father's Birthplace	Maryland
Mother's Maiden Name	Rebecca Johnson			Mother's Birthplace	" "
Name of person giving information	Lewis Worthington			How related to deceased	none.

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Valvular affection of heart.		How long	General years
Immediate	Cerebral paralysis.		How long	Four days.
Are the name, age, sex, color, date and place correctly given above?		Yes.	Signature of Physician	J.W. Lacy.
			Address	Lisbon. Md.
Accident or Suicide?				



Name
in
Full

Name unknown

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

PHYSICIAN
OR CORONER

Died at	Town	County		MARYLAND	
Date of death 190	Month 12	Day 23	Years Age about 50	Months	Days
Sex	Male	Color or Race	White	Birth- place	unknown
Married, Single or Widowed	Not Known	Occupation apparently a Labourer			
Name of Wife or Husband	Not Known				
Father's Name	O	Father's Birthplace O			
Mother's Maiden Name	O	Mother's Birthplace O			
Name of person giving Information	Policeman E Harris	How related to deceased None			

CAUSES OF DEATH

Primary

Exposure

(No)

How long

about 2 days

Immediate

not known

How long

Are the name, age, sex, color, date
and place correctly given above?

Yes

Signature of
Physician

Address

J H Hasan acting Coroner
Elmridge Howard Lee M.D.

Accident or Suicide?

The man was found dead in the
woods near Watertown Attawassee So.
apparently a tramp and no way of
Identifying him

J. H. Resen